

# FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No 1215 0188 Expires 11 30 2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U S686  3 Name and address of person filing  Name Ana M Hanson  PO Box Bldg Room No If any	2 Fiscal Year Covered From  1		
Name Ana M Hanson	4 Name file number and address of labor organization  Name Painters and Allied Trades District Council 36		
Name Ana M Hanson	Name Painters and Allied Trades District Council 36		
PO Box Bldg Room No If any	Lohor Organization File Number 1939 STETT 20 4 3 Ct /		
PO Box Bldg Room No If any	Labor Organization File Number 030-996 30-396		
	P O Box Building and Room Number if any		
Street 297 N Marengo Ave Ste 120	Street 297 N Marengo Ave Suite 120		
City Pasadena	_ City Pasadena		
State California ZIP Code + 4	State California L ZIP Code + 4 91101		
5 Position in labor organization Field Representative			
A Held an interest in engaged in transactions (including loans) with or monetary value from an employer whose employees your organizate.  6 Name and address of Employer (including trade name if any)  Name N/A  Trade Name if any	derived income or other economic benefit of tion represents or is actively seeking to represent  7 a Nature of Interest Transaction or Income		
P O Box Bldg Room No If any	7 b Amount.		
City  State  State  ZIP Code + 4 - 2 + + 1 1 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	N (C) 101, they "		
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15 Signature and verification. The understand declares under penalty of	f Penury and other applicable penalties of the law, that all of the information		
submitted in this report (including the information contained in any accompanundersigned a knowledge and belief true correct, and complete (See the signal of the correct and complete see the signal of the correct and c	lying documents) has been examined by the signatory and is to the best of the ection on penalties in the instructions )		

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Name of Person Filing Ana Hanson	File Number U		
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested			
8 Name and address of Business (including trade name if any)  Name So CA Painters Labor/Mgmt Cooperation Commit  Trade Name if any LMCC  PO Box Bldg Room No if any  Street 297 N Marengo Ave Ste 103  City Pasadena  State California ZIP Code + 4 91101	9 Business deals with    X   a Labor Organization     b Trust     c Employer		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing		
Name Trade Name if any  P O Box Bidg Room No if any	The LMCC is a jointly administered Labor/Mgmt fund established under the terms of the CBA. The LMCC arbitrates disputes issues and interpretations of the agreement. The LMCC promotes and fosters positive Labor/Mgmt relations		
Street	11 b Approximate dollar value of such dealing \$0		
City	12 a Nature of interest held or income received		
State ZIP Code + 4	Attended the LAP FCA holiday dinner at the Queen Mary in Long Beach CA November 2004		
	12 b Amount \$35		
C Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	or other thing of value		
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment		
Name  Trade Name if any  PO Box Bldg Room No if any  Street  City  State  ZIP Code + 4			
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment.		

Name of Person Filing Ana Hanson		File Number U
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#### **Part B Continuation Page**

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)	9 Business deals with	
Name So CA Painting/Drywall Industries H&W Trust	a Labor Organization	
Trade Name if any SCPDI		
PO Box Bidg Room No if any P O Box 5548	b Trust	
Street	c Employer	
City El Monte	_	
State California ZIP Code + 4 91734	-	
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name So CA Painting/Drywall Industries H&W Trust	The SCPDI was established for the providing and paying health benefit	
Trade Name if any SCPDI	Beneficiaries either from principal	
PO Box Bidg Room No if any PO Box 5548	i, s	) † p. fr
Street	× 1	, ki - i k
	1	ab r
City El Monte	j	
State California ZIP Code + 4 91734	11 b Approximate dollar value of such dealing	\$0
	12 a Nature of interest held or income received	
	Attended the International Foundat	
	Benefits in New Orleans LA Nov : Hotel meals and daily transportat.	
	liber means and daily clambpoleus.	· · · · · · · · · · · · · · · · · · ·
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	12 b Amount.	\$1 161

Name of Person Filing Ana Hanson	File Number U
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### Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)	9 Business deals with	
Name So CA Painting/Drywall Industries H&W Trust	a Labor Organization	
P O Box Bldg Room No if any P O Box 5548	D Trust	
Street	c Employer	
City El Monte		
State California ZIP Code + 4 91734		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name So CA Painting/Drywall Industries H&W Trust	The SCPDI was established for the purpose of providing and paying health benefits to beneficiaries either from prinicpal or income or	
Trade Name if any SCPDI	both	
PO Box Bldg Room No if any PO Box 5548	111	
Street	1	
City El Monte	7	
State California ZIP Code + 4 91734	11 b Approximate dollar value of such dealing 50	
	12 a Nature of interest held or income received	
	Attended the International Foundation for Employee Benefits in New Orleans CA Nov 30-Dec 4 2004	
	Airfare and trustee conference registration fee, and workshop fees	
	Airfare \$515 40	
	Registration \$1 485 00	
	Total \$2 000 40 shared by 2, trusts - 3	
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	12 b Amount , \$1 000	

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Name of Person Filing Ana Hanson	File Number U

### Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

		-
8 Name and address of Business (including trade name if any)	9 Business deals with	
Name Painters and Allied Trades Paint Makers Pens	a Labor Organization	
Trade Name Ifany Paint Makers Pension Trust		
PO Box Bldg Room No if any	b Trust	
Street 13191 Crossroads Pkwy N Sulte 205	C Employer	
City City of Industry		
State California ZIP Code + 4 91746 3434		\
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name Painters and Allied Trades Paint Makers Pens	The Painters & Allied Trades Paint Makers Pension Plan was established for the purpose of providing	
Trade Name if any Paint Makers Pension Trust	and paying retirement benefits to beneficiaries either from principal or income or both	
PO Box Bldg Room No if any		
Street 13191 Crossroads Pkwy N Suite 205		t dear
City Of Industry		P .
State California ZIP Code + 4 91746-3434	11 b Approximate dollar value of such dealing	<sup>‡</sup> i , \$0
	12 a Nature of interest held or income received	
	Attended the International Foundation for Employee Benefits in New Orleans LA Nov 30 Dec 4 2004 Airfare conference registration and workshop fee Airfare \$514 40 Registration and Workshop \$1485 00 Total \$2 000 40 shared by 2 trust	
	1	کی پ <sup>و</sup> میا
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	12 b Amount	# \$1 000

Ana Hanson Reporting period ending December 31, 2004

## **DISCLAIMER**

The transactions, dealings and interests that are detailed in the attached Form LM-30 represent my good faith effort to reconstruct the reportable occurrences for the periods of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing, or interest that should have been reported for the period of January 1, 2004 to December 31, 2004, I will file an amended Form LM-30